

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE Jul 18, 2018

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| CONTRACT NO N40080-17-C-0505 | TITLE AND LOCATION Repairs to Paint & Blast Shop, Bldg. 339NS, NSA Annapolis | REPORT NO 037 |
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| CONTRACTOR Lansdowne Construction | SUPERINTENDENT Fredrick K. Gerheiser, PE |
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| AM WEATHER | PM WEATHER | MAX TEMP (F) | MIN TEMP (F) |
|------------|------------|--------------|--------------|

WORK PERFORMED TODAY

| Schedule Activity No | WORK LOCATION AND DESCRIPTION | EMPLOYER | NUMBER | TRADE | HRS |
|----------------------|--|----------------|--------|-----------------------------------|-----|
| 64; 65; 70; 71 | Bldg 339NS Weld Shop - continued piping and steam trap installation of UH 3-1, 3-2, 3-3, 3-4, 3-5, 3-6, 1-4, 4-1, 4-2, 5-1, 5-2, 6-1. All of those UHs have been hung and piping is progressing. | BPI Mechanical | 2 | Pipefitter; Pipefitter Apprentice | 20 |
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| JOB SAFETY | WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes) | <input checked="" type="radio"/> YES <input type="radio"/> NO | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT SHEETS | 20 |
| | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report) | <input type="radio"/> YES <input checked="" type="radio"/> NO | CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT | 564 |
| | WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed) | <input type="radio"/> YES <input checked="" type="radio"/> NO | TOTAL WORK HOURS FROM START OF CONSTRUCTION | 584 |
| | WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed actions.) | <input type="radio"/> YES <input checked="" type="radio"/> NO | | |

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| Schedule Activity No | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | <input checked="" type="checkbox"/> SAFETY REQUIREMENTS HAVE BEEN MET | Add | Del |
| 64; 65; 70; 71 | Proper wearing and use of PPE; working from a lift with proper tie-off safety requirements. | | | |
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| EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER) | | | Add | Del |
| Schedule Activity No | Submittal # | Description of Equipment/Material Received | | |
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| CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER. | | | | Add | Del |
| Schedule Activity No | Owner | Description of Construction Equipment Used Today (incl Make and Model) | Hours Used | | |
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| Schedule Activity No | REMARKS |
| | Work progressing nicely. Will need access to center bay (Room 102 - Sanding Bay) beginning week of 23 July as discussed with Foreman from Huco and Don Shortridge last week. |
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Jul 18, 2018

CONTRACTOR/SUPERINTENDENT

DATE